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January 20, 2006

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John K. McDonald, Ph.D..
FROM

24
PAGES (WITH COVER)

Serial No. 10/635,428
REFERENCE NO

52761-285976 (0100)
CLIENT/MATTER NO.

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COMMENTS

The facsimile confirmation of the Patent Office imprinted hereon will acknowledge receipt of:
 Applicant: Venkataraman
 Title: Vitamin Compositions for the Treatment and Prevention of
Vascular Disease and Dementia
 Serial No./Docket No.: 10/635,428 52761-285976 (0100)
 Filing Date August 6, 2003

PAPERS SUBMITTED:

1. PTO Form SB30 RCE Transmittal
2. PTO Form SB22 for Three Month Extension of Time
3. Fee Transmittal
4. PTO Form 2038
5. Amendment transmittal form
6. Submission under 37 C.F.R. §1.114 Amendment/Reply
7. Declaration Pursuant to 37 C.F.R. §1.132
8. Information Disclosure Statement
9. PTO FORM SB08

Date: January 20, 2006 Reg. No. 42,860
By: John K. McDonald, Ph.D.

TO BE COMPLETED BY KS OPERATIONS CENTER	
TRANSMISSION RECEIPT DATE/TIME:	
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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

1005.00

Complete if Known

Application Number	10/635,428
Filing Date	August 6, 2003
First Named Inventor	Balaji Venkataraman
Examiner Name	Elli Peselev
Art. Unit	1623
Attorney Docket No.	52761-285976 (0100)

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order Nonc Other (please identify): _____
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- Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Rcissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

		Small Entity
Each claim over 20 (including Rcissues)		Fee (\$)
Each independent claim over 3 (including Reissues)		Fee (\$)
Multiple dependent claims		Fee (\$)

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
25	- 20 or HP =	x	=		50	25
HP = highest number of total claims paid for, if greater than 20.					200	100
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		360	180

5 - 3 or HP = 1 x 100.00 = 100.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
		/ 50 = (round up to a whole number) x		=

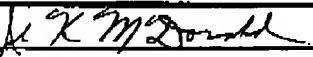
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): RCE (\$395.00); Petition for Three Month Extension of Time (\$510)

\$905.00

SUBMITTED BY

Signature		Registration No. 42,860 (Attorney/Agent)	Telephone 404 815 6500
Name (Print/Type)	John K. McDonald, Ph.D.		Date January 10, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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JAN 20 2006

PATENTS

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re Application of:

Docket No. 52761-285976 (0100)

Balaji Venkataraman

Serial No. 10/635,428

Filed: August 6, 2003

For: Vitamin Compositions for the Treatment and Prevention of Vascular Disease and Dementia

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a paper in the above-identified application.

- Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established.
 Applicant claims small entity status.
 No additional fee is required.
 The additional fee is calculated as shown below:

				HIGHEST PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY RATE	ADDITIONAL FEE	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
TOTAL	25	MINUS	27=	0	x25	\$	x50	\$	
INDEP.	5	MINUS	4=	1	x100	\$100	x200	\$	
FIRST PRESENTATION OF <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS					+180	\$	+360	\$	
					TOTAL	\$100		\$	

- A check in the amount of \$ is attached.
 Form PTO-2038 is attached, authorizing the charge of \$100.00.
 The Commissioner is hereby authorized to charge any additional fees required under 37 CFR §1.16, or credit any overpayment, to Account No. 11-0855. A duplicate copy of this sheet is enclosed.

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 on January 20, 2006.

Signature

KILPATRICK STOCKTON LLP
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 Suite 2800
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 Telephone: 404/815-6500

John K. McDonald, Ph.D., Attorney for Applicant
 Reg. No. 42,860

JAN 20 2006

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	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
TOTAL	25	MINUS	27=	0	x25	\$	x50	\$
INDEP.	5	MINUS	4=	1	x100	\$100	x200	\$
FIRST PRESENTATION OF <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS					+180	\$	+360	\$
					TOTAL ADDITIONAL FEE	\$100		

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